

State of Minnesota

District Court

County

Judicial District:	
Court File Number:	
Case Type:	

STATEMENT OF COUNTERCLAIM AND SUMMONS

Plaintiff #1

Name
Address
City/State/Zip

VS

Defendant #1

Name
Address
City/State/Zip

Plaintiff #2

Name
Address
City/State/Zip

VS

Defendant #2

Name
Address
City/State/Zip

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DEFENDANT'S STATEMENT OF COUNTERCLAIM

- ☐ 1. The Plaintiff(s) owe(s) me \$ _____, plus filing fees and costs of \$ _____, for a total of \$ _____ because (state what happened and when it happened): _____

- ☐ 2. The Plaintiff(s) has/have the following property that belongs to me (list property), _____

valued at \$ _____, plus filing fees and costs of \$ _____
for a total of \$ _____. I want the court to order this property returned to me or make the Plaintiff(s) pay me money for the value of the property.
3. I believe the person(s) I am suing is/are at least 18 years old and not in the military service.

Plaintiff #1 date of birth _____. Plaintiff #2 date of birth _____

4. I understand that if I do not come to court on my hearing date, my case will be dismissed and I may have to pay money to the Plaintiff(s) on any claim that has been filed.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Date

Signature

Printed Name: _____

Title, if any: _____

Address: _____

City/State/Zip: _____

Telephone: _____

E-mail address: _____

NOTICE OF SETTLEMENT

The above-entitled case having been settled, the same may be and hereby is dismissed with my consent.

Date: _____

Defendant's Signature

SUMMONS: IMPORTANT NOTICE TO THE PARTIES

You **must** come to court for the hearing on _____ at _____
Date Time
_____.m. at _____
Location / Address

If you do not come to court for this hearing, you may lose the case and have to pay money to the other party.

Dated: _____

Court Administrator / Deputy